

INVESTIGATION REPORT		DATE
1. TO: CONTRACTING OFFICER'S REPRESENTATIVE (Add Address)		
2. EMPLOYEE'S NAME	3. JOB TITLE & GRADE	4. IDENTIFICATION NO.
5. EMPLOYEE'S ORGANIZATIONAL UNIT		
6. SUMMARY OF EMPLOYEE'S TESTIMONY INCLUDING QUESTION AND ANSWER TO CONFIRM ALLEGED OFFENSE (State exactly when, where, who, what and how it happened.)		
7. WITNESS(ES)		
A. NAME, ID NO. and ORG. UNIT	B. SUMMARY OF EACH TESTIMONY	

8. DATE OF CONSULTATION WITH LMO OR EMPLOYEE'S REPRESENTATIVE(S)

9. FINDING OF FACT (State exactly when, where, who, what and how it happened.)

10. OPINION & RECOMMENDATION

11. TYPED NAME & GRADE OF INVESTIGATING OFFICER

12. SIGNATURE OF INVESTIGATING OFFICER

(If more space is required, use separate sheets)